

BOROUGH OF CHESTERFIELD



ANNUAL REPORT

OF THE

School Medical Officer

For the Year 1932.

J. A. STIRLING, D.S.C., M.B., D.P.H.,
SCHOOL MEDICAL OFFICER.

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BOROUGH OF CHESTERFIELD.

Education Committee, 1932-33

THE MAYOR (Councillor A. W. Swale).

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ALDERMAN H. CROPPER, J.P.

Vice-Chairman :

MISS VIOLET MARKHAM, C.H., J.P.

Members :

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ALDERMAN WAKERLEY.
COUNCILLOR BAINES.
COUNCILLOR EASTWOOD.
COUNCILLOR EVANS.
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MR. T. TURNBULL.



Borough of Chesterfield.

School Medical Officer's Report for 1932.

*To the Chairman and Members of the Education Committee
of the Borough of Chesterfield.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour, as School Medical Officer, to submit my Fourth Annual Report on the Medical Inspection and Treatment of School Children in the Borough during the year ended December 31st, 1932.

The general plan of the Report is the same as in former years and follows closely the requirements of the Board of Education.

I have pleasure in reporting that keenness and cordial relations exist within the Department, and between it and the Director of Education, and the Head Teachers and this Staff, there is the closest co-operation.

I wish to express my appreciation of the work of Dr. Mackay and the other members of the Staff of the School Medical Service, to Dr. Stead for his kindly co-operation, and to you, ladies and gentlemen, for your continued support and kindly assistance.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

J. A. STIRLING,

School Medical Officer.

Staff of the School Medical Service.

School Medical Officer and Medical Officer of Health :

J. A. STIRLING, D.S.C., M.B., Ch.B., D.P.H.

*Assistant School Medical Officer and Assistant Medical Officer
of Health :*

BELL C. MACKAY, M.B., Ch.B., D.P.H.

Ophthalmic Surgeon :

WM. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.

School Dental Officer :

A. ROYDEN LITTLAR, L.D.S.

School Nurses and Health Visitors :

MRS. E. A. JOHNSON

MRS. P. A. ELLOR

MRS. S. M. STREET

MISS O. M. PARKER

MISS E. E. PASSEY

MISS F. SMITH

MISS E. M. HUGHES

Clerical Staff :

G. S. BROWN

MISS E. M. ELLIOTT

MISS N. GILL

MISS E. REYNOLDS

CO-ORDINATION.

The School Medical Officer is also Medical Officer of Health, while the School Nurses are also Health Visitors, and thus the closest co-ordination exists between all the health services of the Borough.

The care of debilitated children under school age is undertaken by the Maternity and Child Welfare Committee.

SCHOOL HYGIENE.

The greatly improved hygienic and open-air conditions brought about by the school reorganisation which has taken place during the last three years, is continuing to have a beneficial effect on the general health of the children.

MEDICAL INSPECTION.

The medical inspections in the schools have been carried out during the year in accordance with the requirements of the Board of Education.

All the children found defective at routine examinations were seen again later in the year by the Medical Officer in order to see whether any treatment ordered had been carried out, and if not, to press for this being obtained at an early date.

Medical inspection of special cases has also been carried out at the School Clinic on Tuesday and Friday mornings. Children are brought to these Clinics by their parents for advice, and the School Nurses and School Attendance Officers also send children to these Clinics if they are absent from school for long periods and appear to be in need of medical advice.

FINDINGS OF MEDICAL INSPECTION.

The findings of Medical Inspection during 1932 are set out in statistical form in Tables IIa and IIb, on pages 21 and 23. Table IIa shows a classification of the various defects and unhealthy conditions found, while Table IIb records the number of individual children found to be affected.

UNCLEANLINESS.

The schools are visited at frequent intervals during the year by the School Nurses, who inspect the children for the presence of verminous or unhealthy conditions, subsequently following up any cases found in an unsatisfactory condition.

During the period under review, 38,578 children were examined in the schools, and of this number 2,094 were found unclean.

INFECTIOUS DISEASE.

The arrangements under this heading remain as before, and have again worked very satisfactorily during the year.

It is gratifying to be able to report a low prevalence of Infectious Disease again this year amongst the Borough school children, in fact, the figures are lower even than those of last year, being 90 as against 144 in 1931. No school closures were necessary during the year.

A summary of these figures is given below:—

	1932	1931
Scarlet Fever	44	63
Diphtheria	14	17
Pneumonia	26	15
Smallpox	—	48
Erysipelas	2	—
Cerebro Spinal Meningitis ...	4	1
	<hr/> 90	<hr/> 144

FOLLOWING UP.

There is nothing to add to my remarks of last year under this heading, except to state that the arrangements made at the beginning of 1931 continue to prove very satisfactory.

The work of the School Nurses during the year is shown in the following analysis:—

(1) Visits to Schools	1,582
(a) For Infectious Disease ...	—
(b) Other Visits	1,284
(c) For Verminous Surveys ...	298
(2) Visits to Homes of School Children	747

Reason of Visit.	No. of Visits.
Verminous Children	154
Scabies	5
Ringworm	12
Eye Diseases and Defects ...	91
Other Medical Defects	425
Enlarged Tonsils and Adenoids ...	9
Infectious Disease	—
Other Visits and Re-visits...	51

MEDICAL TREATMENT.

That the Minor Ailments Clinic in Saltergate still continues its sphere of usefulness is evidenced by the fact that 2,077 children made 8,600 attendances at this clinic during the year.

The new Minor Ailments Clinic at the "Mary Swanwick" School was opened at the beginning of 1932, and during its first year of working 220 children made 1,212 attendances.

The following table shows the complaints for which the children were treated. (Figures for both Minor Ailment Clinics are included in this table):—

Skin Diseases:—

Scabies	...	...	...	...	20
Impetigo	...	...	...	...	388
Ringworm (Scalp)	...	...	...	...	33
Ringworm (Body)	...	...	...	...	34
Other Skin Diseases	...	...	...	...	83

Eye Diseases:—

Blepharitis	...	...	...	...	42
Conjunctivitis	...	...	...	...	21
Corneal Ulcer	...	...	...	...	6
Other Eye Diseases	...	...	...	...	61

Ear Diseases:—

Otorrhoeæ	...	...	...	...	88
Wax	...	...	...	...	23
Other Ear Diseases	...	...	...	...	44

Diseases of the Nose and Throat:—

Enlarged Tonsils and Adenoids	...	...	...	...	69
Other Conditions	...	...	...	...	207
Verminous Heads and Bodies...	...	...	...	...	70
Septic Sores and Abrasions	...	...	...	...	672
General Examinations	...	...	...	...	353
Dental Diseases	...	...	...	...	40
All other Diseases	...	...	...	...	698

TONSILS AND ADENOIDS.

Cases under this heading which require operative treatment are referred to the Royal Hospital, and during the year under review sixty-seven of these cases were operated on.

A special report by Dr. Mackay on this subject will be found on pages 17 and 18.

TUBERCULOSIS.

I wish to again express my grateful thanks to Dr. Nicholson for his continued valuable help and co-operation during the year. It is gratifying to note that Dr. Nicholson again remarks on the continued small incidence of Tuberculosis, and especially Pulmonary Tuberculosis in the Borough School Children, and he gives it as his opinion that this smaller incidence is to a great extent due to the improved hygienic conditions under which the children are working in the new and reconstructed schools.

No cases of Tuberculosis were discovered at routine medical inspection, but during the year six cases of non-pulmonary Tuberculosis in children of school age were notified in the Borough, but there were no cases of Pulmonary Tuberculosis notified.

SKIN DISEASES.

It is gratifying to report that the number of skin diseases discovered during the year was again very small.

VERMINOUS AND DIRTY CHILDREN.

No proceedings were taken during the year under either the Education Act, 1921, or under the School Attendance Bye-laws.

EXTERNAL EYE DISEASES.

These cases are mainly dealt with at the School Clinic, and Dr. Muirhead is always ready and willing to see any difficult case referred to him.

VISION.

810 cases of defective vision and squint were seen by the School Oculist during the year, these children making 2,264 attendances. As a result of these examinations 380 pairs of glasses were prescribed, and of this number 365 pairs were obtained.

I am indebted to Dr. Muirhead, the School Oculist, for the following comments on his work at the Ophthalmic Clinic during the year 1932.

School children requiring an eye examination are referred to the School Eye Clinic, where they are examined. Urgent cases reporting to the School Clinic on a day on which the Eye Clinic is not sitting are referred to the Ophthalmic Department of the Chesterfield Royal Hospital. Therefore, a more or less continuous eye service is provided throughout the week, both during the school term and the holidays.

Glasses or local treatment, or both, are prescribed at the Eye Clinic when necessary, and children requiring special local treatment or operations are referred to the Hospital for out-patient or in-patient treatment.

The number of inflammatory cases is comparatively small. Rarely are they severe, and generally improve quickly with treatment. Credit must be given to the vigilance of the teaching staff, who insist on children with inflamed eyes reporting at the Clinic without delay.

All cases of squint, at whatever age, should be referred to an Ophthalmic Surgeon without delay. Parents are encouraged to bring their children when they suspect squint, even if they have not attained school age. Too often it is too late to commence treatment of a squint after the child has commenced its school career.

The Child Welfare Clinic is very helpful in referring suspected cases. The earlier the treatment is commenced the better the progress. One hopes by such methods to reduce considerably the number of squint operations.

The attention given to the eyes appears to be appreciated by the majority of the parents, and they are willing to co-operate as far as possible. However, there is still room for improvement in the attendance of the parents.

The following is a summary of the year's work at the Ophthalmic Clinic:—

Number of Attendances	2,264
Number of new cases who attended and were tested under Atropine	211
Number of new cases who attended and were tested without Atropine	76
Number of prescriptions given for glasses	168
Number who obtained glasses	158
Number who required no glasses	119
Number found wearing correct glasses	—
Number of cases referred to Hospital	19
Number of cases in which treatment was not completed	6
Number of new cases who have left town and school	—
Number of old cases who attended and were re-examined under Atropine	227
Number of old cases who attended and were re-examined without Atropine	394
Number of old cases in which new glasses were ordered after re-testing	212
Number of old cases who obtained glasses ordered	178

Number of cases for whom glasses were prescribed in 1931 and did not obtain them until 1932	20
Number of cases for which prescriptions were repeated in respect of broken glasses	13
Number of necessitous cases for whom glasses were obtained by the Local Authority:—	
Free	13
Part Payment	126
Full Payment	226
Number of cases referred to Dr. Muirhead from the Minor Ailments Clinic during the year	31

The following table gives an analysis of the cases treated:—

Hypermetropia	139
Hypermetropic Astigmatism	288
Myopia	75
Progressive Myopia	3
Myopic Astigmatism	61
Mixed Astigmatism	36
Concomitant Strabismus	120
Nebulæ	20
Nystagmus	1
Conjunctivitis	37
Phlyctenular Conjunctivitis	7
Blepharitis	27
Corneal Ulcer	3
Chalazion	2
Keratitis	4
Styes, Abscess, etc.	12
Blephorospasm	1
Emmetropia	18
Amblyopia	2
Traumatic Choroidal Scars	1
Asthenopia	15
Epicanthus	3
Anisometropia	29
Dacryocistitis	1
Cataract	2
Epiphora	2
Spasm of Accommodation	4
Ptosis	5
Foreign Body	1
Medical	12
Coloboma	2
Adherent Leucoma	1

DENTAL DEFECTS.

7,168 children were examined by the School Dental Officer during the year 1932, and of this number 3,823 were found to require treatment, and 2,548 were actually treated.

Mr. Littlar, the School Dental Officer, gives the following report on School Dental Inspection and Treatment:—

In the Routine Inspections this year 8 per cent. fewer children required treatment than in 1931. Last year the improvement was 7 per cent. Children of 11 and 12 years of age were included in the Dental Scheme this year, and I hope to include the 13 and 14 year old groups next year, thus bringing all the Elementary School Children into the Authority's Scheme.

Of the number requiring treatment, 66 per cent. accepted and received treatment. In the majority of cases of refusal of treatment I find that it is not so much that the parents absolutely refuse to have their children made dentally fit, but that they have either misread their notices or that it was inconvenient just at that time through sickness or some other household trouble, and in some cases the charge for treatment (one shilling) is a deterrent, but in necessitous cases this is remitted.

When parents who have previously refused treatment for their children eventually bring them to the Clinic for treatment, I explain to them the advantages of the Scheme, and, if they consent to have their child's mouth put in proper order, come into the Scheme wholeheartedly, and not just to have the aching tooth removed, I attend to them. I find more propaganda can be done at the chair side by explaining to the mother than in any other way.

It is pleasing to note the increasing number of parents who are taking more interest in their children's teeth and who come up for advice.

I wish to thank the teaching staff for the work they have done in teaching the children Dental Hygiene, also for urging the parents and children to take advantage of the treatment provided at the Clinic.

The Maternity and Child Welfare Clinic for dental treatment of children of pre-school age is doing very useful work.

CRIPPLING DEFECTS AND ORTHOPÆDICS.

There has been no alteration in the arrangements under this heading during the current year, and may I again express my grateful thanks to Mr. Garriek Wilson and the Staff of the Royal Hospital for their continued valuable help and co-operation.

OPEN-AIR EDUCATION.

The Camp at Stone-Hay Farm was opened this year on May 30th and elosed on September 16th. Owing to Education Week at the beginning of July, it was decided that no school party should go up during that period, and consequently, five instead of the usual six senior schools sent parties of eighteen children and two teachers for periods of a fortnight each. The good effects of open-air life, particularly as the summer of 1932 was so fine, were most noticeable, and the children benefited in every way by the change.

The usual holiday camp was held at Stone-Hay Farm, from July 23rd to August 20th, and, with the co-operation of the Rotary Club, the Education Committee arranged for four weekly parties to attend.

The Settlement Class spent, as usual, a few days at the Settlement Hut, Darley Dale, during the middle of July, and this excellent holiday site was, as an innovation, used for the week commencing August 12th by a party of eighteen senior girls, delicate or recovering from illness, selected from four of the Borough Schools. A marked effect for good resulted from the change.

Other camps were held as follows:—

- (1) Brampton Senior Girls at Cleethorpes, June 18th to June 27th.
- (2) "William Rhodes" Boys at Llanfairfechan, June 4th to June 17th.

SWIMMING AND SCHOOL BATHS.

During the past season, 9,176 children's visits were made to the Central School Baths during school hours, and much steady progress has been made. There has been a marked increase in the number of visits made by children on their own account outside school hours, and the numbers attending have increased from 3,544 (1931 season) to 7,723 for 1932.

PHYSICAL TRAINING.

Conditions under this heading remain as in previous years. I am indebted to the Secretary of the Schools Athletic Association, who has kindly furnished the following report of its activities during the current year:—

The Schools Athletic Association has once more concluded a very successful and enjoyable hard year's work.

The standard reached in the Annual School Sports, again held in the Queen's Park, was a high one in every class of sport participated in, and it is regrettable that, although it was a fine day, the venture showed a loss for the first time in the history of the Association.

A high standard of swimming was maintained at the Annual Swimming Gala, and now that the County Association is to form a Swimming Section, it is hoped that Chesterfield will compete in the County Gala.

Some very enjoyable games were witnessed in the Net-Ball League.

In spite of the difficulty of obtaining suitable grounds, a cricket section was formed. Central Boys and 'Peter Webster' Boys were successful in heading their respective divisions, and for the first time a town team journeyed to Derby to play Derby Boys.

Derbyshire Schools Sports Association:—In the football section the competition for the "Jackson Shield" was carried through with enthusiasm, Chesterfield proving worthy winners. A representative team played three matches, home and away with Nottinghamshire and a home match with Yorkshire. The Derbyshire Boys won both home games and drew the away match, a very creditable record, and it is gratifying to report that several Chesterfield boys received their County Caps.

In the athletic section, six local associations, including the Borough of Chesterfield, entered teams of competitors, and for the second year in succession Chesterfield carried off the three trophies (boys' and girls') with the highest aggregate of points.

For the first time the Derbyshire Schools Sports Association was represented in the Schools Athletic Championships at Guildford, the Derbyshire team consisting of three girls and three boys, two of whom were from the Chesterfield Central School.

PROVISION OF MEALS.

No actual feeding of necessitous children took place during the year, but towards the close of the year a survey of the schools was undertaken and a certain small proportion of necessitous children were found. As a result of this the permission of the Board is at present being sought to commence feeding, and it is expected that a certain number of children will be receiving "milk meals" at the beginning of 1933.

CO-OPERATION OF PARENTS.

During the year a fair number of parents availed themselves of the opportunity of attending the routine medical examinations at the schools. The greater proportion of this number is comprised of the parents of children attending infant departments, the percentage of parents attending the examinations of children in the older age groups being small.

CO-OPERATION OF TEACHERS AND SCHOOL ATTENDANCE OFFICERS.

Reference has been made in previous reports to the whole-hearted assistance afforded by Teachers and Attendance Officers to the School Medical Staff of the Borough, without which the value of medical work in the schools would be seriously impaired.

CO-OPERATION OF VOLUNTARY BODIES.

The Borough Welfare Committee continued and extended its valuable assistance in dealing with crippled and ailing school children, and I would once again like to extend my grateful thanks to Miss Jones and her Staff for continued hearty co-operation.

Acknowledgement must also be made of the effective assistance rendered by the National Society for the Prevention of Cruelty to Children through its local Inspectors, Mr. Kingwell and Mr. Jarvis, in procuring amelioration of conditions of ill-treatment or neglect which have adversely affected the health of the children.

BLIND, DEAF, DUMB, DEFECTIVE AND EPILEPTIC CHILDREN.

At the end of 1932 there were 39 boys and 35 girls receiving care in special schools, either day or residential.

NURSERY SCHOOLS.

There are no Nursery Schools in the Borough, but Nursery Classes have been successfully carried on at the following schools: Highfield Hall, Whittington Moor Infants, Brampton Infants, Hipper Street Infants, and Edmund Street Infants.

SECONDARY SCHOOLS.

The arrangements under this heading remain as before.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

82 Employment Certificates were issued during the year, and no applications were refused.

SCHOOL CLINICS.

The following is the programme of Clinics which has been in force during the period under review:—

	Saltergate Clinic.	Clinic at "Mary Swanwick" School.
(1) Minor Ailments Clinic ...	Daily, 9-30—12-0 (noon)	Daily, 2-30—4 p.m.
(2) Dental Clinic ...	Daily by appointment	Will be open during periods of the year when Whittington area is being inspected and treated, and appointments will then be made.
(3) Ophthalmic Clinic	Tuesday and Saturday mornings by appointment.	.....

SPECIAL REPORTS.

I am indebted to Dr. Mackay, Assistant School Medical Officer, for the following Special Report on the inspection and treatment of tonsil and adenoid cases during 1932.

During the year 672 children have been examined with special reference to the condition of their tonsils and adenoids.

95 were found to have had their tonsils and adenoids removed by operation since the last inspection. The average length of time over which these enlarged tonsils had been observed before operation was advised was 1.7 years.

24 of these cases had had complications, viz.:—3 had suffered from deafness, 7 had enlarged cervical glands, 4 had had chest troubles, 6 had had nasal obstruction or chronic catarrh, and 4 had had discharging ears. The remainder were advised to have the operation because of frequent attacks of tonsillitis and colds, because of mechanical obstruction and blockage of the airway with all its undesirable results, or because the tonsils appeared to be a focus of infection undermining the general health.

The result of observation of the remaining 577 throats over an average period of two years is as follows:—299 definitely enlarged tonsils have shown a tendency to diminish in size, 146 of these are so far reduced towards normal as to render it unnecessary to continue observing them, 254 have remained stationary in their enlargement, and 24 have continued to increase in size.

As viewed at the last re-inspection, I consider that 75 of these tonsillar cases are unsatisfactory. Of these, 18 have been referred for further observation; The parents of 15 have been notified of the condition and advised to report to their own doctor or to the School Clinic for advice; the remaining 42 are cases in which the parents have on previous occasions been notified but have not sought medical advice or have not so far consented to operation. 6 of these cases have complications.

Cases in which it appears that the removal of tonsils and adenoids is very desirable are referred to Mr. Wilkinson at the Royal Hospital for his expert consideration. In those selected cases where the tonsils and adenoids have been removed, the improvement is generally very noticeable both in the local and general condition of the child, and is remarked upon by the parents. I have not heard any adverse criticisms, some mothers only being disappointed to find that the child has not been entirely insured against taking a common cold.

Among those who benefited by this operation last year I would like to make special mention of a few who had failed to respond to other treatment. One girl who had had a discharge from both ears for over two years is now entirely free from that complaint. One who had suffered from asthma for three years, two who had suffered from rather severe bronchitis for two years, and five who periodically had suffered from other chest troubles, are all now completely cured.

GENERAL INFORMATION.

The total accommodation of Elementary Schools in the Borough for the year 1931—32 was 12,136, and the number of children on the register for the same period was 10,606.

The following table shows the names of the schools and the number of children on the register at the end of the year under review:—

Hipper Street Junior Mixed	...	...	...	373
Hipper Street Infants	...	...	...	185
St. Helen's Street Junior Mixed	...	...	...	331
St. Helen's Street Infants	...	...	...	139

Central Boys' Modern	...	...	...	...	307
Central Girls' Modern	...	...	...	...	319
Brampton Girls' Modern	...	...	...	...	249
Brampton Junior Mixed	...	...	...	...	366
Brampton Infants	...	...	...	...	248
Spital Infants	...	...	...	...	25
Old Road Modern Mixed	...	...	...	...	284
Old Road Infant and Junior	...	...	...	...	547
Christ Church	...	...	...	...	162
St. Mary's Catholic (Senior)	...	...	...	...	153
St. Mary's Catholic (Junior)	...	...	...	...	290
Hasland Eyre Street (Infants)	...	...	...	...	178
Hasland Junior	...	...	...	...	299
Derby Lane Girls' Modern	...	...	...	...	252
Derby Lane Infants'	...	...	...	...	277
Derby Lane Junior, Mixed	...	...	...	...	473
"Cavendish" Junior Girls'	...	...	...	...	298
Edmund Street Infants	...	...	...	...	156
Newbold C. of E.	...	...	...	...	148
"Gilbert Heathcote" Junior Boys	...	...	...	...	292
New Whittington Modern Mixed	...	...	...	...	230
New Whittington Infant and Junior	...	...	...	...	346
"Mary Swanwick" Modern, Old Whittington	...	...	...	...	260
"Mary Swanwick" Primary	...	...	...	...	264
Brushes Infant and Junior	...	...	...	...	206
"Peter Webster" Boys' Modern	...	...	...	...	381
"William Rhodes" Infants	...	...	...	...	176
"Violet Markham" Girls' Modern...	...	...	...	...	344
Highfield Hall Infant and Junior	...	...	...	...	421
Whittington Moor Infants	...	...	...	...	249
"William Rhodes" Boys' Modern	...	...	...	...	427
Tapton House Selective	...	...	...	...	345
"William Rhodes" Junior	...	...	...	...	363
Hasland Hall Modern (Mixed)	...	...	...	...	243

TABLE I.

Return of Medical Inspections.**A. ROUTINE MEDICAL INSPECTIONS—**

No. of Code Group Inspections:—

Entrants	...	...	...	...	976	
Intermediates	...	...	...	...	917	
Leavers	...	...	...	...	1,137	
					<hr/>	3,030

B. OTHER INSPECTIONS:—

No. of Special Inspections	...	..	...	38	
No. of Re-Inspections	...	...	...	3,525	
				<hr/>	3,663
					<hr/>
					6,693
					<hr/>

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended 31st December, 1932.

Defect or Disease.					Routine Inspection		Specials	
					No. of Defects		No. of Defects	
					Referred for Treatment	Requiring to be kept under observation, but <i>not</i> referred for treatment.	Referred for Treatment	Requiring to be kept under observation, but <i>not</i> referred for treatment.
(1)					(2)	(3)	(4)	(5)
Skin	Malnutrition				—	6	—	1
	{	Ringworm—						
		Scalp			4	—	—	—
		Body			—	—	—	—
		Scabies			1	—	—	—
		Impetigo			1	—	1	—
		Other Diseases						
(Non-Tuberculous)				10	10	1	3	
Eye	{	Blepharitis			20	27	1	1
		Conjunctivitis			10	7	1	—
		Keratitis			—	—	—	—
		Corneal Opacities			4	—	1	—
		Defective Vision			266	229	25	7
		Squint			10	18	3	3
		Other Conditions			5	9	1	1
Ear	{	Defective Hearing			10	4	—	—
		Otitis Media			8	19	1	—
		Other Ear Diseases			12	4	2	—
Nose and Throat	{	Enlarged Tonsils			21	141	1	1
		Adenoids			1	2	1	—
		Enlarged Tonsils and Adenoids			8	7	1	—
		Other Conditions			3	13	—	1

TABLE II—Continued.

(1)				(2)	(3)	(4)	(5)
Enlarged Cervical Glands (Non-Tuberculous)				—	14	—	1
Defective Speech				—	3	—	—
Teeth—Dental Diseases				27	—	—	—
Heart and Circula- tion	{	Heart Disease—					
		Organic	—	19	—	—	
		Functional	—	108	—	1	
		Anæmia	—	14	—	—	
Lungs	{	Bronchitis	1	6	—	—	
		Other Non-Tuberculous Diseases	—	135	—	5	
Tuber- culosis	{	Pulmonary:—					
		Definite	—	—	—	—	
		Suspected	—	—	—	—	
		Non-Pulmonary—					
		Glands	—	2	—	—	
		Spine	—	—	—	—	
		Hip	—	2	—	—	
		Other Bones & Joints... ..	—	1	—	—	
		Skin	—	—	—	—	
		Other Forms	—	—	—	—	
Nervous System	{	Epilepsy	—	—	—	—	
		Chorea	—	4	—	1	
		Other Conditions	—	—	—	1	
Defor- mities	{	Rickets	1	—	—	—	
		Spinal Curvature	—	2	—	—	
		Other Forms	—	14	—	1	
Other Defects and Diseases				4	28	5	12
				427	848	45	40

**B.—Number of Individual Children found at Routine Medical
Inspection to require Treatment (excluding
Uncleanliness and Dental Diseases).**

Group. (1)	Number of Children.		Percentage of Children found to require Treatment (4)
	Inspected (2)	Found to require Treatment (3)	
CODE GROUPS :			
Entrants	976	40	4.1
Intermediates	917	156	17.0
Leavers	1,137	166	14.5
	3,030	362	11.9

TABLE III.

Return of all Exceptional Children in the Area.

			Boys Girls Total		
BLIND (including partially Blind)	1. Suitable for training in a School for the totally Blind.	At Certified Schools for the Blind ...	3	2	5
		At Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	2. Suitable for training in a School for the partially Blind.	At Certified Schools for the Blind or Partially Blind ...	—	—	—
		At Public Elementary Schools ...	—	1	1
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
DEAF (including Deaf and Dumb and partially Deaf.)	1. Suitable for training in a school for the totally Deaf, or Deaf and Dumb.	At Certified Schools for the Deaf ...	2	2	4
		At Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	2. Suitable for training in a School for the partially Deaf.	At Certified Schools for the Deaf or Partially Deaf ...	—	—	—
		At Public Elementary Schools ...	1	1	2
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
MENTALLY DEFECTIVE	Feeble-minded.	At Certified Schools for Mentally Defective Children ...	—	—	—
		At Public Elementary Schools ...	48	52	100*
		At other Institutions ...	—	2	2
		At no School or Institution ...	—	—	—
	*Of these 100 children, 34 boys and 31 girls attend special classes attached to Elementary Schools in Borough.				
	Notified to Local Mental Deficiency Authority during the year.	Feeble-minded ...	—	—	—
		Imbeciles ...	1	1	2
		Idiots ...	—	—	—
EPILEPTICS	Suffering from severe Epilepsy.	At Certified Schools for Epileptics ...	—	—	—
		At Certified Residential Open Air Schools ...	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	2	—	2
	Suffering from Epilepsy which is not severe.	At Public Elementary Schools ...	2	1	3
		At no School or Institution ...	—	—	—

TABLE III.—Continued.

		Boys Girls Total			
PHYSICALLY DEFECTIVE	Active pulmonary tuberculosis (including pleura and intrathoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	1	1
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Quiescent or arrested pulmonary Tuberculosis (including pleura and intrathoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	2	3	5
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Tuberculosis of the peripheral glands	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	4	2	6
		At other Institutions	—	1	1
		At no School or Institution	—	—	—
	Abdominal Tuberculosis	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools	—	—	—
		At Public Elementary Schools	3	1	4
		At other Institutions	—	1	1
		At no School or Institution	1	—	1
Tuberculosis of bones and joints (not including deformities due to old Tuberculosis	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	3	1	4	
	At Public Elementary Schools	2	4	6	
	At other Institutions	—	1	1	
	At no School or Institution	—	—	—	
Tuberculosis of other organs (skin, etc.)	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—	
	At Public Elementary Schools	—	—	—	
	At other Institutions	—	—	—	
	At no School or Institution	—	—	—	

TABLE III.—Continued.

			Boys	Girls	Total
PHYSICALLY DEFECTIVE <i>continued</i>	Delicate Children, i.e., all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School	At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ..	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools	60	62	122
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Crippled Children other than those with active tuberculous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ...	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools	14	18	32
		At other Institutions	—	—	—
	Children with heart disease, i.e., children whose defect is so severe as to necessitate the provision of education- al facilities other than those of the public elementary school.	At no School or Institution	2	1	3
		At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools ...	—	—	—
		At Certified Residential Open Air Schools	—	—	—
		At Certified Day Open Air Schools ...	—	—	—
		At Public Elementary Schools	3	2	5
	At other Institutions	1	—	1	
		At no School or Institution	—	1	1

TABLE IV.

Return of Defects Treated during the Year ended
31st December, 1932.

TREATMENT TABLE.

Group 1.—**Minor Ailments** (excluding Uncleanliness, for which
see Group 5).

Disease or Defect. (1)	Number of defects treated or under treatment during the year.		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
<i>Skin—</i>			
Ringworm—Scalp	33	—	33
Ringworm—Body	34	—	34
Scabies	20	—	20
Impetigo	283	—	283
Other Skin Diseases	83	—	83
<i>Minor Eye Defects—</i>			
(External and other, but excluding cases falling in Group 2)	130	—	130
<i>Minor Ear Defects</i>	155	—	155
<i>Miscellaneous</i> (e.g., minor injuries, bruises, sores, chilblains, etc.)	2039	—	2039
Total	2877	—	2877

The number of individual Children who attended the Minor Ailments Clinic during 1932 was 2,297, and the number of attendances 9,812.

Group 2.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group 1).

Defect or Disease. (1)	Number of Defects dealt with			
	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at Hospital apart from the Authority's Scheme. (3)	Other-wise (4)	Total (5)
Errors of Refraction (including squint)	810	10	—	820
Other Defect or Disease of the eyes (excluding those recorded in Group 1)	95	19	—	114
Total	905	29	—	934

Total number of Children for whom spectacles were prescribed:—

(a) Under the Authority's Scheme 380

(b) Otherwise 10

Total number of Children who obtained or received spectacles:—

(a) Under the Authority's Scheme 365

(b) Otherwise 14

The number of attendances at the Eye Clinic during 1932 was 2,264.

The amount paid by parents towards glasses provided was £94 17s. 11d.

Group 3.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.

Received Operative Treatment		Received other Forms of Treatment (3)	Total Number Treated (4)
Under the Authority's Scheme in Clinic or Hospital (1)	By Private Practitioner or Hospital apart from the Authority's Scheme (2)		
—	67	21	88

Group 4.—**Dental Defects.**

(1) Number of Children who were:—

(a) Inspected by the Dentist:—

Routine Age Groups.						
Age	5	...	...	...	...	855
„	6	...	...	...	...	995
„	7	...	...	...	...	1,199
„	8	...	...	...	...	907
„	9	...	...	...	...	1,058
„	10	...	...	...	...	1,087
„	11	...	...	...	...	741
„	12	...	...	...	...	326
Total						<hr/> 7,168 <hr/>

(b) Found to require treatment 3,823

(c) Actually treated 2,548

(d) Re-treated during the year as the result of
periodical examination... .. 153

(2) Half-days devoted to:—

Inspection	...	...	...	...	...	43
Treatment	...	...	...	...	...	408
Total						<hr/> 451 <hr/>

(3) Attendances made by Children for treatment ... 2,658

(4) Fillings:—

Permanent Teeth	...	...	...	...	779
Temporary Teeth	...	...	...	...	6
Total					<hr/> 785 <hr/>

(5) Extractions:—

Permanent Teeth	...	...	...	...	814
Temporary Teeth	...	...	...	...	4,469
Total					<hr/> 5,283 <hr/>

(6) Administrations of General Anæsthetics for
Extractions 6

(7) Other Operations:—

Permanent Teeth	...	...	...	...	364
Temporary Teeth	...	...	...	...	106
					<hr/>
Total	...	...	...	...	470
					<hr/>

The amount received from parents for Dental Treatment of children was £81 1s. 0d.

Group 5.—Uncleanliness and Verminous Conditions.

(1) Average number of Visits per School made during the year by the School Nurses	...	...	...	4
(2) Total number of Examinations of Children in the Schools by the School Nurses	...	...	...	38,578
(3) Number of individual Children found unclean	...			2,094
(4) Number of Children cleansed under arrangements made by the Local Education Committee	...			—
(5) Number of cases in which legal proceedings were taken:—				
(a) Under the Education Act, 1921	...			—
(b) Under School Attendance Byelaws	...			—

